City of San Antonio Application for Appointment



Board/Commission/Co	mmittee			
Name:				
Name: (Title)	(Last)	(First)	(Middle)	
Mailing Address:				
	(Street)	(Zip Code)		
Preferred Phone and Fa	ıx:			
	(Phone)	(F	ax)	
Employer		_ Occupation:		
Are you or can you be	qualified to vote in a City	of San Antonio Elect	ion?Yes	No
Are you a City of San A	Antonio resident?	Yes No	How Long?	
In which City Council	District do you reside?	Leng	th of residence:	
or any department, com Yes Do you, your spouse o	nted any other private per nmission, board or commission, No No	ittee of the City within y financial interest, di	the last three years?	·
Yes Do either you, your sp the City of any land, m	ing as an Administrative No ouse or your employer h aterials, supplies or service No	ave any financial inte	,	ctly, in the sale to
Ordinance 100199 sta	tes - appointment to Ci t not only the ethnic mak lowing optional informat	keup of the community		
Spanish culture or origin B = African American P = Asian or Pacific Isla	cludes all persons of Mexic regardless of race.	GENDER CO M = Male F = Female an, Puerto Rican, Cuban		ican or other
O = Other I = American Indian/Al	laska Native Aleutian			

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Do you have any litigation pending or completed within the last 12 months, either professionally, that would affect your ability to fulfill the functions of the board or commiss If yes, please describe:	sion, if selected?
Have you ever been convicted of violating any federal, state or municipal law, regulation of so, give details. Do not include traffic violations.	or ordinance? If
BACKGROUND	
Education:	
Professional:	
Volunteer Experience/Community Service:	
Areas of interest:	
Have you ever been hired for a position with the City?YesNo If yes, list the department(s) and dates below.	
Department: To:	
Reason for leaving City employment:	
Please specify membership on any other governmental Board/Commission/Committee.	
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I have read and understand the guidelines set out in Attachment I of this application. The foregoing and any attached statements are true, accurate and complete; and I agree that any misrepresentation or omission of facts may result in my disqualification for appointment.

Signature Date

PLEASE RETURN COMPLETED FORM TO CITY CLERK'S OFFICE FOR PROCESSING:

City Clerk's Office City Hall, 2nd Floor P.O. Box 839966 San Antonio, Texas 78283-3966 Fax No. City Clerk's Office - (210) 207-6938

(Original copy will be on file in the City Clerk's Office for 12 months.)

Note: All information provided herein or pursuant hereto is considered public record upon receipt.

(Revised Feb., 2005)

ATTACHMENT I

As a Board and Commission member, you will be asked to adhere to the following:

1. Ordinance 88874: FINANCIAL DISCLOSURE REPORT

Members are required to abide to the City's Ethics Code and the requirement for each Board and Commission member to file a <u>Financial Disclosure Report</u> upon appointment, and annually thereafter. <u>Failure to file a Financial Disclosure report will be considered an automatic resignation.</u>

ATTACHMENT II

CONSENT FOR CITY TO CONDUCT A SEARCH OF CRIMINAL HISTORY RECORDS AND RELEASE OF PUBLIC INFORMATION

I hereby state that all of the information in the Application for Appointment is true and correct. I further request, as a part of my Application, that all law enforcement officials and criminal justice agencies release any criminal history records concerning me to the City Clerk of the City of San Antonio in order that qualifications may be checked.

I understand that if any member of the public makes a request for information included in the Application for Appointment, most of the information must be disclosed under the Public Information Act. I understand that the City of San Antonio will attempt to maintain the confidentiality of highly private matters by seeking an Attorney General's opinion in accordance with the Public Information Act. I understand that it may not be legally possible to maintain the confidentiality of such information, and I hereby release the City of San Antonio, and its agents, employees and officers, from any and all liability whatsoever if the information must be released pursuant to the Public Information Act or any other law requiring its release.

Signature				
Sworn to and subscribed to before me by the affiant on this	day of	200		
Notary	Public, State of Texas	ublic, State of Texas		
My Commission Exp	ires:			
	Title			

(*Revised Feb.*, 2005)